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PTO/SB/08A (08-03)

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

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Complete if Known

Application Number	10/552,607
Filing Date	
First Named Inventor	DE OLIVEIRA KASTRUP PEREIRA
Art Unit	2181
Examiner Name	W. TREAT
Attorney Docket Number	NL 030396

U. S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS				
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document
		Country Code ³ *Number ⁴ *Kind Code ⁵ (if known)		Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
WMT	EP 0 962 856 A2		12-08-1999	TEXAS INSTRU.

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W. TREAT

Date Considered

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Substitute for form 1449/PTO					<i>Complete If Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>					Application Number	10/552,807
					Filing Date	
					First Named Inventor	DE OLIVEIRA KASTRUP PEREIRA
					Art Unit	2181
					Examiner Name	W. T. REAF
Sheet	1	of	1	Attorney Docket Number	NL 030396	

NON PATENT LITERATURE DOCUMENTS

Examiner Signature	W. TREAT	Date Considered	9/15/07
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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